FILED

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

OCT 18 2002

DR-2 (Rev. 01/98)

DISCLOSURE REPORT

CHARLES A. SHERIDAN	For Office Use (
COUNTY AUDITOR	

Comm. #

FORM

Indexed Audited

Computer WK

10-17

-02

IMPORTANT: Indicate type of committee you are reporting for:

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate

LABOR CONFRESS. COM. ON POR GOOD C

(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

(8) Support State of Candidates

SIGNATURE OF TREASURER (or person filing this report)

563-242-2735

DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENC	E: JAN 8 2003
I AM FILING A OCT, 19, 200 2 REPORT FOR AN/A (1) EL	ECTION /(2)NON-ELECTION YEAR.
(report date) 10 -19-02 Ir	ndicate one
MCHECK IF AMENDMENT TO REPORT DATED 10-17-02	Local Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)	County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

cash on Hand at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	361.04
ADD TOTAL MONEY TAKEN IN THIS PERIOD	4
Schedule A: Cash Contributions total (Attach Schedule A)	172,75
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	1033.19
SUB-TOTAL\$	4045.55
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B)	1000,00
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	33.79
UNPAID BILLS (From Schedule D - Attach Schedule D)	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$	
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$	

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NA	AME (Must be same as on Statement of Organiz	ation)
CLINTON	LABOR GENERESS-COMON	POLLEDUC

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
. —	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8/5/02 3/30/02	ID# CK#	CLINTON LASOR CONCRESS BOX 461 CLINTON 1A 5X732		\$147,15	
	ID#				
1/30/02	CK#	ABOUG		又5.60	
	ID#				
	CK#				
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	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	. 174 MC	

...

TOTAL (if last page of this schedule)

\$172.75

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE N	AME (Must be s	ame as on State	ment of Orgai	nization)	
CUNTON	LAFOR CON	recss-Co.	MMON S	OLITIEAL	EDUCATION

Vento	N WHOLE OUR	VECCSS- COMMIDN JOLITIENS	S BDOUFTION	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-22.02	ID# CK# 22.0	VILMONT FOR CO. ATT POBOX 256 CAMANCHE IA	DONATION	\$ 300,00
8-7-02	ID# CK#gま/	STOP 10WA ETHICS BD: 514 E LOCUST DES MONDES 19	FINE	100.00
4-3-02	ID# 1477 CK# 222	DEJUS STARLING CAMATICA PO BOX 21 8 CALAMUS 14 52728	DONATION	300,00
16-9-03	ID# / 477 CK#2 23	DENVIS STARGUE CAMPAIND PO BOX 218 CALAMUS LA SITZE	PODATION	100.00
ル~7-02	ID# CK# 2 ① ()	STEWART FOR RECORDER 541 SCENIC DR CUNTON M 52732	DONATION	100.00
10-7-02	ID# CK# 225	VILMONT FOR CO ATT POBOX 256 CAMANCHE 1A	PONATION	100.00
	ID# CK#			
	ID# CK#		·	

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$\((1000.00) \)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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